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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/763,652
Filing Date	January 23, 2004
First Named Inventor	AUER et al
Art Unit	2877
Examiner Name	VALENTIN, Juan D.
Attorney Docket Number	2512.2100000(2181.045)

**I hereby revoke all previous powers of attorney given in the above-identified application.**

☐ A Power of Attorney is submitted herewith.

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature	/Mitchell E. Alter/		
Name	Mitchell E. Alter		
Date	May 9, 2008	Telephone	305-380-3636

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 forms are submitted.

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